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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

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To: Assistant Commissioner for Patents Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

As of September 9, 2002, I will be employed at the U.S. Patent & Trademark Office as a Patent Examiner. In compliance with 37 C.F.R. 10.10(c), which states that a practioner who is an employee of the Office cannot prosecute or aid in any manner in the prosecution of any patent application before the Office, I request to withdraw as an agent for the above identifed patent application.

_			d by this withdrawal.	
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Name	Josephine	Your	ng	
Signature	James	2		
Date	September 3, 200			
NOTE: Withdrawa	al is effective when app	oroved rather than wi	hen received.	to of a time

period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.

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Unless there are at least 30 days between approval of withdrawal and the expiration date of a time